



Last Name CRUM	First Name JAMES	Middle Name W	SSN 169-54-8277	
Street Address 62 RINAMAN ROAD	City ELDRED	State PA	Zip 16731	County Radius Reference RHS/Cruis
Phone [redacted]	DOB [redacted]	Age Range [redacted] - [redacted]		

Search for other possible name spellings Include Bankruptcies (\$0.25)

Output Type: Formatted HTML Cut and Paste / Printer Friendly Text (No Reports)

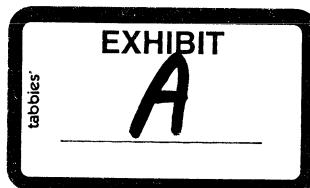
Important: The Public Records and commercially available data sources used in this system have errors. Data is sometimes entered poorly, processed incorrectly and is generally not free from defect. This system should not be relied upon as definitively accurate. Before relying on any data this system supplies, it should be independently verified.

Search completed

Records: 1 to 4 of 4

Click Icons Below To Run a Report		Export to Excel		Icon Legend		Click Icons Below To Run a Report	
All	Full Name	Age/DOB	Address	Dates	Phone Information	Print	Print
	JAMES W CRUM JR 169-54-8277	41 Mar 01, 1963	RR 2 BOX 196 ELDRED PA 16731-9202	Aug 00 - Oct 04			
	JAMES W CRUM JR 169-54-8277	41 Mar 01, 1963	1 RR 1 BOX TURTLEPOINT PA 16750	Dec 99	642-2568		
	JAMES W CRUM JR 169-54-8277	41 Mar 01, 1963	PO BOX 169 TURTLEPOINT PA 16750-0169	Dec 94 - Jan 99			
	JAMES W CRUM JR 169-54-8277	41 Mar 01, 1963	RR 1 BOX 169 TURTLEPOINT PA 16750-9724	Mar 91 - Jan 99			

Records: 1 to 4 of 4



Postmaster
Eldred, PA 16731
 City, State, ZIP Code

Date: November 9, 2004

**Request For Change of Address or Boxholder
 Information Needed for Service of Legal Process**

Please furnish the new address or the name and street address (if a boxholder) for the following:

Name: James W. Crum, Jr.

Address: 62 Rinaman Road, Eldred, Pennsylvania 16731

NOTE: The name and last known address are required for change of address information. The name, if known, and post office box address are required for boxholder information.

The following information is provided in accordance with 39 CFR 265.6(d)(6)(ii). There is no fee for providing boxholder information. The fee for providing change of address information is waived in accordance with 39 CFR 265.6(d)(1) and (2) and corresponding Administrative Support Manual 352.44a and b.

1. Capacity of requester (e.g., process server, attorney, party representing himself): ATTORNEY
2. Statute or regulation that empowers me to serve process (not required when requester is an attorney or a party acting *pro se* - except a corporation acting *pro se* must cite statute):
3. The names of all known parties to the litigation: United States of America, James W. Crum, Jr., Joanne M. Crum
4. The court in which the case has been or will be heard: UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF PENNSYLVANIA
5. The docket or other identifying number if one has been issued:
6. The capacity in which this individual is to be served (e.g., defendant or witness): DEFENDANT

WARNING

THE SUBMISSION OF FALSE INFORMATION TO OBTAIN AND USE CHANGE OF ADDRESS INFORMATION OR BOXHOLDER INFORMATION FOR ANY PURPOSE OTHER THAN THE SERVICE OF LEGAL PROCESS IN CONNECTION WITH ACTUAL OR PROSPECTIVE LITIGATION COULD RESULT IN CRIMINAL PENALTIES INCLUDING A FINE OF UP TO \$10,000 OR IMPRISONMENT OR (2) TO AVOID PAYMENT OF THE FEE FOR CHANGE OF ADDRESS INFORMATION OF NOT MORE THAN 5 YEARS, OR BOTH (Title 18 U.S.C. Section 1001).

I certify that the above information is true and that the address information is needed and will be used solely for service of legal process in connection with actual or prospective litigation.

Gary W. Darr/mcj
 Signature

Address
McGRATH & ASSOCIATES, P.C.
1500 UNION BANK BUILDING, 306 FOURTH AVENUE
PITTSBURGH, PA 15222
 City, State, ZIP Code

GARY W. DARR, ESQUIRE

Printed Name

FOR POST OFFICE USE ONLY

- | | | |
|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | No change of address order on file. | NEW ADDRESS or BOXHOLDER'S POSTMARK
NAME and STREET ADDRESS |
| <input type="checkbox"/> | Not known at address given. | _____ |
| <input type="checkbox"/> | Moved, left no forwarding address. | _____ |
| <input type="checkbox"/> | No such address. | _____ |



U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See instructions for "Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER C.A. No. 04-331-E		
DEFENDANT JAMES W. CRUM, JR., and JOANNE M. CRUM	TYPE OF PROCESS SUMMONS & COMPLAINT		
SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN JAMES W. CRUM, JR.			
ADDRESS (Street or RFD, Apartment No., City State and ZIP Code) 62 Rinaldi Road, Erie, Pennsylvania 16731 (please see the attached directions)			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW			
Gary W. Darr, Esquire McGrath & Associates, PC 1500 Union Bank Building 306 Fourth Avenue Pittsburgh, PA 15222		Number of process to be served with this Form 285	
		Number of parties to be served in this case	
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Please personally serve above-named individual. No response by mail. Please serve ASAP.

Signature of Attorney or other Originator requesting service on behalf of Plaintiff / Defendant		TELEPHONE NUMBER		DATE
<i>Gary W. Darr, Jr.</i>		(412) 281-4333		June 13, 2005
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE				
I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk
I hereby certify and return that I have personally served <input checked="" type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.				
<input checked="" type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Name and title of individual served (if not shown above) <input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode				
Address (complete only if different than shown above)		Date	Time	
		<i>6/24/05</i>	1 am 1 pm	<i>1:05</i>
Signature of U.S. Marshal or Deputy <i>[Signature]</i>				
Service Fee <i>270.00</i>	Total Mileage Charges Including endeavors <i>108.00</i>	Fees/Charges	Total Charges <i>378.00</i>	Advance Deposit (Amount owed to U.S. Marshal* or (Amount of Refund*)

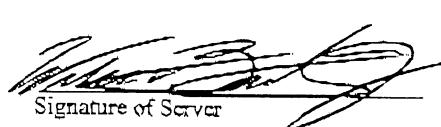
REMARKS:



U.S. Marshal/Deputy

PRIOR EDITIONS
MAY BE USED

1. CLERK OF COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGEMENT OF RECEIPT

RETURN OF SERVICE		
Service of the Summons and Complaint was made by me*	DATE <u>6/24/2005</u>	
NAME OF SERVER (PRINT) <u>William V. G. -ton Jr.</u>	TITLE <u>Server</u>	
Check one box below to indicate appropriate method of service		
<input type="checkbox"/> Served personally upon the defendant. Place where served: _____		
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. _____		
<input type="checkbox"/> Name of person with whom the summons and complaint were left: _____		
<input type="checkbox"/> Returned unexecuted: _____		
<input checked="" type="checkbox"/> Other (specify): <u>I attempted personal service at his home. He or his wife were (I believe) at home and would not answer. Both of us were in the driveway also. I left all the pertinent documents in the front door. (WVB)</u>		
STATEMENT OF SERVICE FEES		
TRAVEL <u>108.00</u>	SERVICES <u>270.00</u>	TOTAL <u>378.00</u>
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <p>Executed on <u>6/24/05</u> Date <u>6/24/05</u></p> <p> Signature of Server</p> <p><u>175 Park Row 30th 310</u> <u>Erie, Pa. 16501</u> Address of Server</p>		
<small>* As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.</small>		

IN THE UNITED STATES DISTRICT COURT FOR
THE WESTERN DISTRICT OF PENNSYLVANIA

UNITED STATES OF AMERICA,)
)
Plaintiff,) CIVIL NO.: 04-331E
)
vs.)
)
JAMES W. CRUM, JR. and)
JOANNE M. CRUM,)
)
Defendants.)
)

ORDER OF COURT

AND NOW, to-wit, this _____ day of _____ 2005, upon consideration
of the within Motion for Special Order of Service of Summons and Complaint, IT IS HEREBY
ORDERED that Plaintiff's Motion is GRANTED, and Plaintiff is authorized to serve Defendant,
James W. Crum, Jr., with the Summons and Complaint and any additional document or pleading
requiring service in the manner prescribed by Pa. R.C.P. 402(a) by sending a copy of the document
or pleading via First Class U.S. Mail, Postage Prepaid, Certificate of Mailing and Certified Mail,
Return Receipt Requested to RR #2, Box 196, Eldred, PA 16731 and 62 Rinaman Road, Eldred, PA
16731 with service to be deemed valid and complete upon mailing. IT IS FURTHER ORDERED
that the period to serve Defendant is enlarged sixty (60) days from the date of this Order.

United States District Judge